

Form 471 RAL Block 5 Funding Requests Report

THIS REPORT DOES NOT CONTAIN ANY DECISIONS CONCERNING YOUR REQUESTS FOR DISCOUNTS.

FRN: 1289408  
SPIN: 143010363 Service Provider Name: Signet Systems, LLC  
Category of Service: Internet Access  
Pre-discount Amount: \$5,400.00  
Discount Percentage: 40%

FRN: 1289412  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$30,424.44  
Discount Percentage: 40%

FRN: 1289415  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$5,760.00  
Discount Percentage: 40%

FRN: 1289418  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$5,760.00  
Discount Percentage: 40%

FRN: 1289420  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$3,546.00  
Discount Percentage: 40%

FRN: 1289426  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$3,510.12  
Discount Percentage: 40%

FRN: 1289428  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$862.92  
Discount Percentage: 40%

FRN: 1289444  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$803.16  
Discount Percentage: 40%

FRN: 1289451  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$610.68  
Discount Percentage: 40%

FRN: 1289460  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$27,286.92  
Discount Percentage: 40%

FRN: 1289466  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$6,163.20  
Discount Percentage: 40%

FRN: 1289473  
SPIN: 143001192 Service Provider Name: AT&T Corp.  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$1,902.24

Discount Percentage: 40%

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Form 471 RAL Block 5 Funding Requests Report

THIS REPORT DOES NOT CONTAIN ANY DECISIONS CONCERNING YOUR REQUESTS FOR DISCOUNTS.

FRN: 1289477  
SPIN: 143001192 Service Provider Name: AT&T Corp.  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$1,049.76  
Discount Percentage: 40%

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FRN: 1289486  
SPIN: 143001192 Service Provider Name: AT&T Corp.  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$388.56  
Discount Percentage: 40%

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FRN: 1289492  
SPIN: 143000627 Service Provider Name: United States Cellular Operating Company  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$2,682.24  
Discount Percentage: 40%

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FRN: 1289500  
SPIN: 143000627 Service Provider Name: United States Cellular Operating Company  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$514.92  
Discount Percentage: 40%

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FRN: 1289517  
SPIN: 143000893 Service Provider Name: Nextel  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$5,552.52  
Discount Percentage: 40%

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FRN: 1289522  
SPIN: 143000074 Service Provider Name: McLeod USA Telecommunications  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$59,637.60  
Discount Percentage: 40%

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FRN: 1289529  
SPIN: 143000677 Service Provider Name: Verizon Wireless fka Cellco Partnership  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$487.08  
Discount Percentage: 40%

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FRN: 1289533  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$451.56  
Discount Percentage: 40%

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FRN: 1289536  
SPIN: 143001856 Service Provider Name: SBC Wisconsin  
Category of Service: Telecommunications Service  
Pre-discount Amount: \$390.48  
Discount Percentage: 40%

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[HOME](#) [CANCEL](#) [SAVE & EXIT](#) [HELP](#)**FCC Form 471**

Services Ordered and Certification Form

[Block 2 & 3](#)[Block 4](#)[Block 5](#)[Block 6](#)Applicant's Form Identifier: **471GermSDY8**Entity Number: **132728**Contact Person: **Craig Fisher**Phone Number: **(920) 217-5983****IMPORTANT****Please record this application's information in a secure place for future reference****471 Application Number: 464845****Entity Number of Billed Entity (Applicant): 132728****Security Code Number: 37134**[Continue >>](#)

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# Schools and Libraries Universal Service Program

## Services Ordered and Certification Form 471

### Application Display

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#### Block 1: Billed Entity Information

Applicant's Form Identifier:

471GermSDY8

471 Application Number: 464845

Cert. Postmark Date:

Out of Window Letter Date:

Funding Year: 07/01/2005 -  
06/30/2006

Form Status: INCOMPLETE

Billed Entity Number:

132728

RAL Date:

Name: GERMANTOWN SCHOOL DISTRICT

Address: N104W13840 DONGES BAY RD

City: GERMANTOWN State: WI Zip: 53022 4430

Phone: 414-253-3904 Ext:

Fax: 414-251-6999

Contact Name: Craig Fisher

Address: N9109 NOE RD

City: APPLETON State: WI Zip: 54915

Contact Phone: 920-217-5983 Ext:

Contact Fax: 920-739-1522 Ext:

E-mail: cfisher@e-clipsenet.com

Contact Mode: EMAIL

Alternate Contact Info.: SAME

Type of Application: SCHOOL DISTRICT

Ineligible Orgs: N

#### Block 2: Impact of Services Ordered on Schools

Number of students to be served: 3716

SERVICE DESCRIPTION	BEFORE ORDER	AFTER ORDER
b Telephone service: Number of classrooms with phone service	228	228
d Direct broadband services: Number of buildings served at the following speeds:		
Less than 10 mbps	7	7
e Direct connections to the Internet: Number of drops	1	1
f Number of classrooms with Internet access	228	228
g Number of computers or other devices with Internet access	1000	1000

#### Block 3: Impact of Services Ordered on Libraries

## NOT APPLICABLE AS THIS APPLICATION IS FOR DISTRICT

## Block 4: Worksheets

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**Worksheet A No: 669468      Student Count: 3716****Weighted Product (Sum. Column 8): 1486.4****Shared Discount: 40%**

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**1. School Name: AMY BELLE ELEMENTARY SCHOOL**  
**2. Entity Number: 60423 NCES: 55 05160 00549**  
**3. Rural/Urban: Urban**  
**4. Student Count: 321    5. NSLP Students: 22    6. NSLP Students/Students: 6.853%**  
**7. Discount: 40%      8. Weighted Product: 128.4**  
**9. Pre-K/Adult Ed/Juv: Y    10. Alt Disc Mech: N**

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**1. School Name: COUNTY LINE ELEMENTARY SCHOOL**  
**2. Entity Number: 60441 NCES: 55 05160 00550**  
**3. Rural/Urban: Urban**  
**4. Student Count: 533    5. NSLP Students: 37    6. NSLP Students/Students: 6.941%**  
**7. Discount: 40%      8. Weighted Product: 213.2**  
**9. Pre-K/Adult Ed/Juv: Y    10. Alt Disc Mech: N**

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**1. School Name: GERMANTOWN HIGH SCHOOL**  
**2. Entity Number: 60439 NCES: 55 05160 00557**  
**3. Rural/Urban: Urban**  
**4. Student Count: 1295    5. NSLP Students: 55    6. NSLP Students/Students: 4.247%**  
**7. Discount: 40%      8. Weighted Product: 518**  
**9. Pre-K/Adult Ed/Juv: N    10. Alt Disc Mech: N**

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**1. School Name: KENNEDY MIDDLE SCHOOL**  
**2. Entity Number: 60438 NCES: 55 05160 00554**  
**3. Rural/Urban: Urban**  
**4. Student Count: 862    5. NSLP Students: 62    6. NSLP Students/Students: 7.192%**  
**7. Discount: 40%      8. Weighted Product: 344.8**  
**9. Pre-K/Adult Ed/Juv: N    10. Alt Disc Mech: N**

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**1. School Name: MACARTHUR ELEMENTARY SCHOOL**  
**2. Entity Number: 60440 NCES: 55 05160 00555**  
**3. Rural/Urban: Urban**  
**4. Student Count: 392    5. NSLP Students: 21    6. NSLP Students/Students: 5.357%**  
**7. Discount: 40%      8. Weighted Product: 156.8**  
**9. Pre-K/Adult Ed/Juv: Y    10. Alt Disc Mech: N**

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**1. School Name: ROCKFIELD ELEMENTARY SCHOOL**  
**2. Entity Number: 60436 NCES: 55 05160 00556**  
**3. Rural/Urban: Urban**  
**4. Student Count: 313    5. NSLP Students: 21    6. NSLP Students/Students: 6.709%**  
**7. Discount: 40%      8. Weighted Product: 125.2**  
**9. Pre-K/Adult Ed/Juv: N    10. Alt Disc Mech: N**

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## Block 5: Discount Funding Request(s)

FRN: 1289408 FCDL Date:	
10. Original FRN:	
11. Category of Service: Internet Access	12. 470 Application Number: 110840000517455
13. SPIN: 143010363	14. Service Provider Name: Signet Systems, LLC
15a. Non-Contracted tariffed/Month to Month Service:	15b. Contract Number: MTM
15c. Covered under State Master Contract:	15d. FRN from Previous Year:
16a. Billing Account Number: Germantown School Distric	16b. Multiple Billing Account Numbers?:
17. Allowable Contract Date: 01/03/2005	18. Contract Award Date:
19a. Service Start Date: 07/01/2005	19b. Service End Date: 06/30/2006
20. Contract Expiration Date:	
21. Attachment #: Ticomix1	22. Block 4 Worksheet No.: 669468
23a. Monthly Charges: \$450.00	23b. Ineligible monthly amt.: \$0.00
23c. Eligible monthly amt.: \$450.00	23d. Number of months of service: 12
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$5,400.00	
23f. Annual non-recurring (one-time) charges: \$0.00	23g. Ineligible non-recurring amt.: \$0.00
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00	
23i. Total program year pre-discount amount ( 23e + 23h): \$5,400.00	
23j. % discount (from Block 4): 40	
23k. Funding Commitment Request ( 23i x 23j): \$2,160.00	

FRN: 1289412 FCDL Date:	
10. Original FRN:	
11. Category of Service: Telecommunications Service	12. 470 Application Number: 110840000517455
13. SPIN: 143001856	14. Service Provider Name: SBC Wisconsin
15a. Non-Contracted tariffed/Month to Month Service:	15b. Contract Number: T
15c. Covered under State Master Contract:	15d. FRN from Previous Year:
16a. Billing Account Number: 26225339492344	16b. Multiple Billing Account Numbers?:
17. Allowable Contract Date: 01/03/2005	18. Contract Award Date:
19a. Service Start Date: 07/01/2005	19b. Service End Date: 06/30/2006
20. Contract Expiration Date:	
21. Attachment #: SBC1	22. Block 4 Worksheet No.: 669468
23a. Monthly Charges: \$2,535.37	23b. Ineligible monthly amt.: \$0.00
23c. Eligible monthly amt.: \$2,535.37	23d. Number of months of service: 12
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$30,424.44	
23f. Annual non-recurring (one-time) charges: \$0.00	23g. Ineligible non-recurring amt.: \$0.00
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00	
23i. Total program year pre-discount amount ( 23e + 23h): \$30,424.44	
23j. % discount (from Block 4): 40	
23k. Funding Commitment Request ( 23i x 23j): \$12,169.78	

<b>FRN: 1289415 FCDL Date:</b>	
<b>10. Original FRN:</b>	
<b>11. Category of Service:</b> Telecommunications Service	<b>12. 470 Application Number:</b> 110840000517455
<b>13. SPIN:</b> 143001856	<b>14. Service Provider Name:</b> SBC Wisconsin
<b>15a. Non-Contracted tariffed/Month to Month Service:</b>	<b>15b. Contract Number:</b> T
<b>15c. Covered under State Master Contract:</b>	<b>15d. FRN from Previous Year:</b>
<b>16a. Billing Account Number:</b> 26250271001961	<b>16b. Multiple Billing Account Numbers?:</b>
<b>17. Allowable Contract Date:</b> 01/03/2005	<b>18. Contract Award Date:</b>
<b>19a. Service Start Date:</b> 07/01/2005	<b>19b. Service End Date:</b> 06/30/2006
<b>20. Contract Expiration Date:</b>	
<b>21. Attachment #:</b> SBC2	<b>22. Block 4 Worksheet No.:</b> 669468
<b>23a. Monthly Charges:</b> \$480.00	<b>23b. Ineligible monthly amt.:</b> \$0.00
<b>23c. Eligible monthly amt.:</b> \$480.00	<b>23d. Number of months of service:</b> 12
<b>23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d):</b> \$5,760.00	
<b>23f. Annual non-recurring (one-time) charges:</b> \$0.00	<b>23g. Ineligible non-recurring amt.:</b> \$0.00
<b>23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g):</b> \$0.00	
<b>23i. Total program year pre-discount amount ( 23e + 23h):</b> \$5,760.00	
<b>23j. % discount (from Block 4):</b> 40	
<b>23k. Funding Commitment Request ( 23i x 23j):</b> \$2,304.00	

<b>FRN: 1289418 FCDL Date:</b>	
<b>10. Original FRN:</b>	
<b>11. Category of Service:</b> Telecommunications Service	<b>12. 470 Application Number:</b> 110840000517455
<b>13. SPIN:</b> 143001856	<b>14. Service Provider Name:</b> SBC Wisconsin
<b>15a. Non-Contracted tariffed/Month to Month Service:</b>	<b>15b. Contract Number:</b> T
<b>15c. Covered under State Master Contract:</b>	<b>15d. FRN from Previous Year:</b>
<b>16a. Billing Account Number:</b> 26250273001969	<b>16b. Multiple Billing Account Numbers?:</b>
<b>17. Allowable Contract Date:</b> 01/03/2005	<b>18. Contract Award Date:</b>
<b>19a. Service Start Date:</b> 07/01/2005	<b>19b. Service End Date:</b> 06/30/2006
<b>20. Contract Expiration Date:</b>	
<b>21. Attachment #:</b> SBC3	<b>22. Block 4 Worksheet No.:</b> 669468
<b>23a. Monthly Charges:</b> \$480.00	<b>23b. Ineligible monthly amt.:</b> \$0.00
<b>23c. Eligible monthly amt.:</b> \$480.00	<b>23d. Number of months of service:</b> 12
<b>23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d):</b> \$5,760.00	
<b>23f. Annual non-recurring (one-time) charges:</b> \$0.00	<b>23g. Ineligible non-recurring amt.:</b> \$0.00
<b>23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g):</b> \$0.00	
<b>23i. Total program year pre-discount amount ( 23e + 23h):</b> \$5,760.00	
<b>23j. % discount (from Block 4):</b> 40	
<b>23k. Funding Commitment Request ( 23i x 23j):</b> \$2,304.00	



FRN: 1289420 FCDL Date:	
10. Original FRN:	
11. Category of Service: Telecommunications Service	12. 470 Application Number: 110840000517455
13. SPIN: 143001856	14. Service Provider Name: SBC Wisconsin
15a. Non-Contracted tariffed/Month to Month Service:	15b. Contract Number: T
15c. Covered under State Master Contract:	15d. FRN from Previous Year:
16a. Billing Account Number: 26262819019243	16b. Multiple Billing Account Numbers?:
17. Allowable Contract Date: 01/03/2005	18. Contract Award Date:
19a. Service Start Date: 07/01/2005	19b. Service End Date: 06/30/2006
20. Contract Expiration Date:	
21. Attachment #: SBC4	22. Block 4 Worksheet No.: 669468
23a. Monthly Charges: \$295.50	23b. Ineligible monthly amt.: \$.00
23c. Eligible monthly amt.: \$295.50	23d. Number of months of service: 12
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$3,546.00	
23f. Annual non-recurring (one-time) charges: \$.00	23g. Ineligible non-recurring amt.: \$.00
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00	
23i. Total program year pre-discount amount ( 23e + 23h): \$3,546.00	
23j. % discount (from Block 4): 40	
23k. Funding Commitment Request ( 23i x 23j): \$1,418.40	

FRN: 1289426 FCDL Date:	
10. Original FRN:	
11. Category of Service: Telecommunications Service	12. 470 Application Number: 110840000517455
13. SPIN: 143001856	14. Service Provider Name: SBC Wisconsin
15a. Non-Contracted tariffed/Month to Month Service:	15b. Contract Number: T
15c. Covered under State Master Contract:	15d. FRN from Previous Year:
16a. Billing Account Number: 26225302112341	16b. Multiple Billing Account Numbers?:
17. Allowable Contract Date: 01/03/2005	18. Contract Award Date:
19a. Service Start Date: 07/01/2005	19b. Service End Date: 06/30/2006
20. Contract Expiration Date:	
21. Attachment #: SBC5	22. Block 4 Worksheet No.: 669468
23a. Monthly Charges: \$292.51	23b. Ineligible monthly amt.: \$.00
23c. Eligible monthly amt.: \$292.51	23d. Number of months of service: 12
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$3,510.12	
23f. Annual non-recurring (one-time) charges: \$.00	23g. Ineligible non-recurring amt.: \$.00
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00	
23i. Total program year pre-discount amount ( 23e + 23h): \$3,510.12	
23j. % discount (from Block 4): 40	
23k. Funding Commitment Request ( 23i x 23j): \$1,404.05	

FRN: 1289428 FCDL Date:	
10. Original FRN:	

11. Category of Service: Telecommunications Service		12. 470 Application Number: 110840000517455	
13. SPIN: 143001856		14. Service Provider Name: SBC Wisconsin	
15a. Non-Contracted tariffed/Month to Month Service:		15b. Contract Number: T	
15c. Covered under State Master Contract:		15d. FRN from Previous Year:	
16a. Billing Account Number: 26262841002050		16b. Multiple Billing Account Numbers?:	
17. Allowable Contract Date: 01/03/2005		18. Contract Award Date:	
19a. Service Start Date: 07/01/2005		19b. Service End Date: 06/30/2006	
20. Contract Expiration Date:			
21. Attachment #: SBC6		22. Block 4 Worksheet No.: 669468	
23a. Monthly Charges: \$71.91		23b. Ineligible monthly amt.: \$0.00	
23c. Eligible monthly amt.: \$71.91		23d. Number of months of service: 12	
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$862.92			
23f. Annual non-recurring (one-time) charges: \$0.00		23g. Ineligible non-recurring amt.: \$0.00	
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00			
23i. Total program year pre-discount amount ( 23e + 23h): \$862.92			
23j. % discount (from Block 4): 40			
23k. Funding Commitment Request ( 23i x 23j): \$345.17			

FRN: 1289444 FCDL Date:	
10. Original FRN:	
11. Category of Service: Telecommunications Service	
12. 470 Application Number: 110840000517455	
13. SPIN: 143001856	
14. Service Provider Name: SBC Wisconsin	
15a. Non-Contracted tariffed/Month to Month Service:	
15b. Contract Number: T	
15c. Covered under State Master Contract:	
15d. FRN from Previous Year:	
16a. Billing Account Number: 26262811594219	
16b. Multiple Billing Account Numbers?:	
17. Allowable Contract Date: 01/03/2005	
18. Contract Award Date:	
19a. Service Start Date: 07/01/2005	
19b. Service End Date: 06/30/2006	
20. Contract Expiration Date:	
21. Attachment #: SBC7	
22. Block 4 Worksheet No.: 669468	
23a. Monthly Charges: \$66.93	
23b. Ineligible monthly amt.: \$0.00	
23c. Eligible monthly amt.: \$66.93	
23d. Number of months of service: 12	
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$803.16	
23f. Annual non-recurring (one-time) charges: \$0.00	
23g. Ineligible non-recurring amt.: \$0.00	
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00	
23i. Total program year pre-discount amount ( 23e + 23h): \$803.16	
23j. % discount (from Block 4): 40	
23k. Funding Commitment Request ( 23i x 23j): \$321.26	

FRN: 1289451 FCDL Date:	
10. Original FRN:	
11. Category of Service: Telecommunications Service	
12. 470 Application Number: 110840000517455	

13. SPIN: 143001856	14. Service Provider Name: SBC Wisconsin
15a. Non-Contracted tariffed/Month to Month Service:	15b. Contract Number: T
15c. Covered under State Master Contract:	15d. FRN from Previous Year:
16a. Billing Account Number: 26262841028295	16b. Multiple Billing Account Numbers?:
17. Allowable Contract Date: 01/03/2005	18. Contract Award Date:
19a. Service Start Date: 07/01/2005	19b. Service End Date: 06/30/2006
20. Contract Expiration Date:	
21. Attachment #: SBC8	22. Block 4 Worksheet No.: 669468
23a. Monthly Charges: \$50.89	23b. Ineligible monthly amt.: \$0.00
23c. Eligible monthly amt.: \$50.89	23d. Number of months of service: 12
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$610.68	
23f. Annual non-recurring (one-time) charges: \$0.00	23g. Ineligible non-recurring amt.: \$0.00
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00	
23i. Total program year pre-discount amount ( 23e + 23h): \$610.68	
23j. % discount (from Block 4): 40	
23k. Funding Commitment Request ( 23i x 23j): \$244.27	

FRN: 1289460 FCDL Date:	
10. Original FRN:	
11. Category of Service: Telecommunications Service	12. 470 Application Number: 110840000517455
13. SPIN: 143001856	14. Service Provider Name: SBC Wisconsin
15a. Non-Contracted tariffed/Month to Month Service:	15b. Contract Number: MTM
15c. Covered under State Master Contract:	15d. FRN from Previous Year:
16a. Billing Account Number: 414 S66-8130 250	16b. Multiple Billing Account Numbers?:
17. Allowable Contract Date: 01/03/2005	18. Contract Award Date:
19a. Service Start Date: 07/01/2005	19b. Service End Date: 06/30/2006
20. Contract Expiration Date:	
21. Attachment #: T1SBC1	22. Block 4 Worksheet No.: 669468
23a. Monthly Charges: \$2,273.91	23b. Ineligible monthly amt.: \$0.00
23c. Eligible monthly amt.: \$2,273.91	23d. Number of months of service: 12
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$27,286.92	
23f. Annual non-recurring (one-time) charges: \$0.00	23g. Ineligible non-recurring amt.: \$0.00
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00	
23i. Total program year pre-discount amount ( 23e + 23h): \$27,286.92	
23j. % discount (from Block 4): 40	
23k. Funding Commitment Request ( 23i x 23j): \$10,914.77	

FRN: 1289466 FCDL Date:	
10. Original FRN:	
11. Category of Service: Telecommunications Service	12. 470 Application Number: 110840000517455
13. SPIN: 143001856	14. Service Provider Name: SBC Wisconsin
15a. Non-Contracted tariffed/Month to Month	15b. Contract Number: MTM

<b>Service:</b>	
<b>15c. Covered under State Master Contract:</b>	<b>15d. FRN from Previous Year:</b>
<b>16a. Billing Account Number: 414 S66-4116 480</b>	<b>16b. Multiple Billing Account Numbers?:</b>
<b>17. Allowable Contract Date: 01/03/2005</b>	<b>18. Contract Award Date:</b>
<b>19a. Service Start Date: 07/01/2005</b>	<b>19b. Service End Date: 06/30/2006</b>
<b>20. Contract Expiration Date:</b>	
<b>21. Attachment #: T1SBC2</b>	<b>22. Block 4 Worksheet No.: 669468</b>
<b>23a. Monthly Charges: \$513.60</b>	<b>23b. Ineligible monthly amt.: \$0.00</b>
<b>23c. Eligible monthly amt.: \$513.60</b>	<b>23d. Number of months of service: 12</b>
<b>23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$6,163.20</b>	
<b>23f. Annual non-recurring (one-time) charges: \$0.00</b>	<b>23g. Ineligible non-recurring amt.: \$0.00</b>
<b>23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00</b>	
<b>23i. Total program year pre-discount amount ( 23e + 23h): \$6,163.20</b>	
<b>23j. % discount (from Block 4): 40</b>	
<b>23k. Funding Commitment Request ( 23i x 23j): \$2,465.28</b>	

<b>FRN: 1289473 FCDL Date:</b>	
<b>10. Original FRN:</b>	
<b>11. Category of Service: Telecommunications Service</b>	<b>12. 470 Application Number: 110840000517455</b>
<b>13. SPIN: 143001192</b>	<b>14. Service Provider Name: AT&amp;T Corp.</b>
<b>15a. Non-Contracted tariffed/Month to Month Service:</b>	<b>15b. Contract Number: MTM</b>
<b>15c. Covered under State Master Contract:</b>	<b>15d. FRN from Previous Year:</b>
<b>16a. Billing Account Number: 0531615508001</b>	<b>16b. Multiple Billing Account Numbers?:</b>
<b>17. Allowable Contract Date: 01/03/2005</b>	<b>18. Contract Award Date:</b>
<b>19a. Service Start Date: 07/01/2005</b>	<b>19b. Service End Date: 06/30/2006</b>
<b>20. Contract Expiration Date:</b>	
<b>21. Attachment #: ATT1</b>	<b>22. Block 4 Worksheet No.: 669468</b>
<b>23a. Monthly Charges: \$158.52</b>	<b>23b. Ineligible monthly amt.: \$0.00</b>
<b>23c. Eligible monthly amt.: \$158.52</b>	<b>23d. Number of months of service: 12</b>
<b>23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$1,902.24</b>	
<b>23f. Annual non-recurring (one-time) charges: \$0.00</b>	<b>23g. Ineligible non-recurring amt.: \$0.00</b>
<b>23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00</b>	
<b>23i. Total program year pre-discount amount ( 23e + 23h): \$1,902.24</b>	
<b>23j. % discount (from Block 4): 40</b>	
<b>23k. Funding Commitment Request ( 23i x 23j): \$760.90</b>	

<b>FRN: 1289477 FCDL Date:</b>	
<b>10. Original FRN:</b>	
<b>11. Category of Service: Telecommunications Service</b>	<b>12. 470 Application Number: 110840000517455</b>
<b>13. SPIN: 143001192</b>	<b>14. Service Provider Name: AT&amp;T Corp.</b>
<b>15a. Non-Contracted tariffed/Month to Month Service:</b>	<b>15b. Contract Number: MTM</b>
<b>15c. Covered under State Master Contract:</b>	<b>15d. FRN from Previous Year:</b>

16a. Billing Account Number: 0532051890001		16b. Multiple Billing Account Numbers?:	
17. Allowable Contract Date: 01/03/2005		18. Contract Award Date:	
19a. Service Start Date: 07/01/2005		19b. Service End Date: 06/30/2006	
20. Contract Expiration Date:			
21. Attachment #: ATT2		22. Block 4 Worksheet No.: 669468	
23a. Monthly Charges: \$87.48		23b. Ineligible monthly amt.: \$0.00	
23c. Eligible monthly amt.: \$87.48		23d. Number of months of service: 12	
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$1,049.76			
23f. Annual non-recurring (one-time) charges: \$0.00		23g. Ineligible non-recurring amt.: \$0.00	
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00			
23i. Total program year pre-discount amount ( 23e + 23h): \$1,049.76			
23j. % discount (from Block 4): 40			
23k. Funding Commitment Request ( 23i x 23j): \$419.90			

FRN: 1289486		FCDL Date:	
10. Original FRN:			
11. Category of Service: Telecommunications Service		12. 470 Application Number: 110840000517455	
13. SPIN: 143001192		14. Service Provider Name: AT&T Corp.	
15a. Non-Contracted tariffed/Month to Month Service:		15b. Contract Number: MTM	
15c. Covered under State Master Contract:		15d. FRN from Previous Year:	
16a. Billing Account Number: 0532056006001		16b. Multiple Billing Account Numbers?:	
17. Allowable Contract Date: 01/03/2005		18. Contract Award Date:	
19a. Service Start Date: 07/01/2005		19b. Service End Date: 06/30/2006	
20. Contract Expiration Date:			
21. Attachment #: ATT3		22. Block 4 Worksheet No.: 669468	
23a. Monthly Charges: \$32.38		23b. Ineligible monthly amt.: \$0.00	
23c. Eligible monthly amt.: \$32.38		23d. Number of months of service: 12	
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$388.56			
23f. Annual non-recurring (one-time) charges: \$0.00		23g. Ineligible non-recurring amt.: \$0.00	
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00			
23i. Total program year pre-discount amount ( 23e + 23h): \$388.56			
23j. % discount (from Block 4): 40			
23k. Funding Commitment Request ( 23i x 23j): \$155.42			

FRN: 1289492		FCDL Date:	
10. Original FRN:			
11. Category of Service: Telecommunications Service		12. 470 Application Number: 110840000517455	
13. SPIN: 143000627		14. Service Provider Name: United States Cellular Operating Company (for KY 3)	
15a. Non-Contracted tariffed/Month to Month Service:		15b. Contract Number: MTM	
15c. Covered under State Master Contract:		15d. FRN from Previous Year:	
16a. Billing Account Number: 926774381		16b. Multiple Billing Account Numbers?:	
		18. Contract Award Date:	

17. Allowable Contract Date: 01/03/2005	
19a. Service Start Date: 07/01/2005	19b. Service End Date: 06/30/2006
20. Contract Expiration Date:	
21. Attachment #: USCellular1	22. Block 4 Worksheet No.: 669468
23a. Monthly Charges: \$223.52	23b. Ineligible monthly amt.: \$0.00
23c. Eligible monthly amt.: \$223.52	23d. Number of months of service: 12
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$2,682.24	
23f. Annual non-recurring (one-time) charges: \$0.00	23g. Ineligible non-recurring amt.: \$0.00
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00	
23i. Total program year pre-discount amount ( 23e + 23h): \$2,682.24	
23j. % discount (from Block 4): 40	
23k. Funding Commitment Request ( 23i x 23j): \$1,072.90	

FRN: 1289500 FCDL Date:	
10. Original FRN:	
11. Category of Service: Telecommunications Service	12. 470 Application Number: 110840000517455
13. SPIN: 143000627	14. Service Provider Name: United States Cellular Operating Company (for KY 3)
15a. Non-Contracted tariffed/Month to Month Service:	15b. Contract Number: MTM
15c. Covered under State Master Contract:	15d. FRN from Previous Year:
16a. Billing Account Number: 300005014	16b. Multiple Billing Account Numbers?:
17. Allowable Contract Date: 01/03/2005	18. Contract Award Date:
19a. Service Start Date: 07/01/2005	19b. Service End Date: 06/30/2006
20. Contract Expiration Date:	
21. Attachment #: USCellular2	22. Block 4 Worksheet No.: 669468
23a. Monthly Charges: \$42.91	23b. Ineligible monthly amt.: \$0.00
23c. Eligible monthly amt.: \$42.91	23d. Number of months of service: 12
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$514.92	
23f. Annual non-recurring (one-time) charges: \$0.00	23g. Ineligible non-recurring amt.: \$0.00
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00	
23i. Total program year pre-discount amount ( 23e + 23h): \$514.92	
23j. % discount (from Block 4): 40	
23k. Funding Commitment Request ( 23i x 23j): \$205.97	

FRN: 1289517 FCDL Date:	
10. Original FRN:	
11. Category of Service: Telecommunications Service	12. 470 Application Number: 110840000517455
13. SPIN: 143000893	14. Service Provider Name: Nextel
15a. Non-Contracted tariffed/Month to Month Service:	15b. Contract Number: MTM
15c. Covered under State Master Contract:	15d. FRN from Previous Year:
16a. Billing Account Number: 541390518	16b. Multiple Billing Account Numbers?:
17. Allowable Contract Date: 01/03/2005	18. Contract Award Date:

19a. Service Start Date: 07/01/2005		19b. Service End Date: 06/30/2006	
20. Contract Expiration Date:			
21. Attachment #: Nextel1		22. Block 4 Worksheet No.: 669468	
23a. Monthly Charges: \$462.71		23b. Ineligible monthly amt.: \$0.00	
23c. Eligible monthly amt.: \$462.71		23d. Number of months of service: 12	
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$5,552.52			
23f. Annual non-recurring (one-time) charges: \$0.00		23g. Ineligible non-recurring amt.: \$0.00	
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00			
23i. Total program year pre-discount amount ( 23e + 23h): \$5,552.52			
23j. % discount (from Block 4): 40			
23k. Funding Commitment Request ( 23i x 23j): \$2,221.01			

FRN: 1289522		FCDL Date:	
10. Original FRN:			
11. Category of Service: Telecommunications Service		12. 470 Application Number: 110840000517455	
13. SPIN: 143000074		14. Service Provider Name: McLeod USA Telecommunications	
15a. Non-Contracted tariffed/Month to Month Service:		15b. Contract Number: MTM	
15c. Covered under State Master Contract:		15d. FRN from Previous Year:	
16a. Billing Account Number: 501510		16b. Multiple Billing Account Numbers?:	
17. Allowable Contract Date: 01/03/2005		18. Contract Award Date:	
19a. Service Start Date: 07/01/2005		19b. Service End Date: 06/30/2006	
20. Contract Expiration Date:			
21. Attachment #: McLeod1		22. Block 4 Worksheet No.: 669468	
23a. Monthly Charges: \$4,969.80		23b. Ineligible monthly amt.: \$0.00	
23c. Eligible monthly amt.: \$4,969.80		23d. Number of months of service: 12	
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$59,637.60			
23f. Annual non-recurring (one-time) charges: \$0.00		23g. Ineligible non-recurring amt.: \$0.00	
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00			
23i. Total program year pre-discount amount ( 23e + 23h): \$59,637.60			
23j. % discount (from Block 4): 40			
23k. Funding Commitment Request ( 23i x 23j): \$23,855.04			

FRN: 1289529		FCDL Date:	
10. Original FRN:			
11. Category of Service: Telecommunications Service		12. 470 Application Number: 110840000517455	
13. SPIN: 143000677		14. Service Provider Name: Verizon Wireless fka Cellco Partnership	
15a. Non-Contracted tariffed/Month to Month Service:		15b. Contract Number: MTM	
15c. Covered under State Master Contract:		15d. FRN from Previous Year:	
16a. Billing Account Number: 601253199		16b. Multiple Billing Account Numbers?:	
17. Allowable Contract Date: 01/03/2005		18. Contract Award Date:	

19a. Service Start Date: 07/01/2005		19b. Service End Date: 06/30/2006	
20. Contract Expiration Date:			
21. Attachment #: Verizon1		22. Block 4 Worksheet No.: 669468	
23a. Monthly Charges: \$40.59		23b. Ineligible monthly amt.: \$0.00	
23c. Eligible monthly amt.: \$40.59		23d. Number of months of service: 12	
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$487.08			
23f. Annual non-recurring (one-time) charges: \$0.00		23g. Ineligible non-recurring amt.: \$0.00	
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00			
23i. Total program year pre-discount amount ( 23e + 23h): \$487.08			
23j. % discount (from Block 4): 40			
23k. Funding Commitment Request ( 23i x 23j): \$194.83			

FRN: 1289533		FCDL Date:	
10. Original FRN:			
11. Category of Service: Telecommunications Service		12. 470 Application Number: 110840000517455	
13. SPIN: 143001856		14. Service Provider Name: SBC Wisconsin	
15a. Non-Contracted tariffed/Month to Month Service:		15b. Contract Number: MTM	
15c. Covered under State Master Contract:		15d. FRN from Previous Year:	
16a. Billing Account Number: 26252811814468		16b. Multiple Billing Account Numbers?:	
17. Allowable Contract Date: 01/03/2005		18. Contract Award Date:	
19a. Service Start Date: 07/01/2005		19b. Service End Date: 06/30/2006	
20. Contract Expiration Date:			
21. Attachment #: SBC9		22. Block 4 Worksheet No.: 669468	
23a. Monthly Charges: \$37.63		23b. Ineligible monthly amt.: \$0.00	
23c. Eligible monthly amt.: \$37.63		23d. Number of months of service: 12	
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$451.56			
23f. Annual non-recurring (one-time) charges: \$0.00		23g. Ineligible non-recurring amt.: \$0.00	
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00			
23i. Total program year pre-discount amount ( 23e + 23h): \$451.56			
23j. % discount (from Block 4): 40			
23k. Funding Commitment Request ( 23i x 23j): \$180.62			

FRN: 1289536		FCDL Date:	
10. Original FRN:			
11. Category of Service: Telecommunications Service		12. 470 Application Number: 110840000517455	
13. SPIN: 143001856		14. Service Provider Name: SBC Wisconsin	
15a. Non-Contracted tariffed/Month to Month Service:		15b. Contract Number: MTM	
15c. Covered under State Master Contract:		15d. FRN from Previous Year:	
16a. Billing Account Number: 26225504382012		16b. Multiple Billing Account Numbers?:	
17. Allowable Contract Date: 01/03/2005		18. Contract Award Date:	
19a. Service Start Date: 07/01/2005		19b. Service End Date: 06/30/2006	
20. Contract Expiration Date:			



21. Attachment #: SBC10	22. Block 4 Worksheet No.: 669468
23a. Monthly Charges: \$32.54	23b. Ineligible monthly amt.: \$0.00
23c. Eligible monthly amt.: \$32.54	23d. Number of months of service: 12
23e. Annual pre-discount amount for eligible recurring charges ( 23c x 23d): \$390.48	
23f. Annual non-recurring (one-time) charges: \$0.00	23g. Ineligible non-recurring amt.: \$0.00
23h. Annual pre-discount amount for eligible non-recurring charges ( 23f - 23g): \$0.00	
23i. Total program year pre-discount amount ( 23e + 23h): \$390.48	
23j. % discount (from Block 4): 40	
23k. Funding Commitment Request ( 23i x 23j): \$156.19	

### Block 6: Certifications and Signature

24. ☒ I certify that the entities listed in Block 4 of this application are eligible for support because they are: (check one or both)

a. ☒ schools under the statutory definitions of elementary and secondary schools found in the **No Child Left Behind Act of 2001, 20 U.S.C. Secs. 7801(18) and (38)**, that do not operate as for-profit businesses, and do not have endowments exceeding \$50 million; and/or

b. ☐ libraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any schools including, but not limited to elementary, secondary schools, colleges, or universities

25. ☒ I certify that the entity I represent or the entities listed on this application have secured access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity, necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support. I certify that the entities I represent or the entities listed in this application have secured access to all of the resources to pay the discounted charges for eligible services from funds to which access has been secured in the current funding year. I certify that the Billed Entity will pay the non-discount portion of the cost of the goods and services to the service provider(s).

a.	Total funding year pre-discount amount on this Form 471 (Add the entities from Item 23i on all Block 5 Discount Funding Requests.)	\$163,184.40
b.	Total funding commitment request amount on this Form 471 (Add the entities from Items 23K on all Block 5 Discount Funding Requests.)	\$65,273.76
c.	Total applicant non-discount share (Subtract Item 25b from Item 25a.)	\$97,910.64
d.	Total budgeted amount allocated to resources not eligible for E-rate support	\$152,879.60
e.	Total amount necessary for the applicant to pay the non-discount share of the services requested on this application AND to secure access to the resources necessary to make effective use of the discounts. (Add Items 25c and 25d.)	\$250,790.24
f.	Check this box if you are receiving any of the funds in Item 25e directly from a service provider listed on any Forms 471 filed by this Billed Entity for this funding year, or if a service provider listed on any of the Forms 471 filed by this Billed Entity for this funding year assisted you in locating funds in Items 25e.	

26. ☒ I certify that all of the schools and libraries or library consortia listed in Block 4 of this application are covered by technology plans that are written, that cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body, and an SLD-certified technology plan approver, prior to the commencement of service. The plans are written at the following level(s):

a. ☒ an individual technology plan for using the services requested in this application; and/or

- b. ☐ higher-level technology plan(s) for using the services requested in this application; or  
c. ☐ no technology plan needed; applying for basic local, cellular, PCS, and/or long distance telephone service and/or voice mail only.

27. ☒ I certify that I posted my Form 470 and (if applicable) made my RFP available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted were carefully considered and the most cost-effective service offering was selected, with price being the primary factor considered, and is the most cost-effective means of meeting educational needs and technology plan goals.

28. ☒ I certify that the entity responsible for selecting the service provider(s) has reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that the entity or entities listed on this application have complied with them.

29. ☒ I certify that the services the applicant purchases at discounts provided by 47 U.S.C. Sec. 254 will be used solely for educational purposes and will not be sold, resold, or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. Sec. 54.500(k). Additionally, I certify that the Billed Entity has not received anything of value or a promise of anything of value, other than services and equipment requested under this form, from the service provider(s) or any representative or agent thereof or any consultant in connection with this request for services.

30. ☒ I certify that I and the entity(ies) I represent have complied with all program rules and I acknowledge that failure to do so may result in denial of discount funding and/or cancellation of funding commitments. There are signed contracts covering all of the services listed on this Form 471 except for those services provided under non-contracted tariffed or month-to-month arrangements. I acknowledge that failure to comply with program rules could result in civil or criminal prosecution by the appropriate law enforcement authorities.

31. ☒ I acknowledge that the discount level used for shared services is conditional, for future years, upon ensuring that the most disadvantaged schools and libraries that are treated as sharing in the service, receive an appropriate share of benefits from those services.

32. ☒ I certify that I will retain required documents for a period of at least five years after the last day of service delivered. I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the application for, receipt of, and delivery of services receiving schools and libraries discounts, and that if audited, I will make such records available to the Administrator. I acknowledge that I may be audited pursuant to participation in the schools and libraries program.

33. ☒ I certify that I am authorized to order telecommunications and other supported services for the eligible entity(ies) listed on this application. I certify that I am authorized to submit this request on behalf of the eligible entity(ies) listed on this application, that I have examined this request, that all of the information on this form is true and correct to the best of my knowledge, that the entities that are receiving discounts pursuant to this application have complied with the terms, conditions and purposes of this program, that no kickbacks were paid to anyone and that false statements on this form can be punished by fine or forfeiture under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under the Title 18 of the United States Code, 18 U.S.C. Sec. 1001 and civil violations of the False Claims Act.

34. ☒ I acknowledge that FCC rules provide that persons who have been convicted of criminal violations or held civilly liable for certain acts arising from their participation in the schools and libraries support mechanism are subject to suspension and debarment from the program. I will institute reasonable measures to be informed, and will notify USAC should I be informed or become aware that I or any of the entities listed on this application, or any person associated in any way with my entity and/or entities listed on this application, is convicted of a criminal violation or held civilly liable for acts arising from their participation in the schools and libraries support mechanism.

35. ☒ I certify that if any of the Funding Requests on this Form 471 are for discounts for products or services that contain both eligible and ineligible components, that I have allocated the cost of the contract to eligible and ineligible companies as required by the Commission's rules at 47 C.F.R. Sec. 54.504(g)(1),(2).

36. ☒ I certify that this funding request does not constitute a request for internal connections services, except basic maintenance services, in violation of the Commission requirement that eligible entities are not eligible for

such support more than twice every five funding years beginning with Funding Year 2005 as required by the Commission's rules at 47 C.F.R. Sec. 54.506(c).

37. ☒ I certify that the non-discounted portion of the costs for eligible services will not be paid by the service provider. The pre-discount costs of eligible services features on this Form 471 are net of any rebates or discounts offered by the service provider. I acknowledge that, for the purpose of this rule, the provision, by the provider of a supported service, of free services or products unrelated to the supported service or product constitutes a rebate of some or all of the cost of the supported services.

40. Printed name of authorized person	<b>Craig Fisher</b>
41. Title or position of authorized person	<b>Erate Technology Consultant</b>
42a. Street Address, P.O Box or Route Number	<b>N9109 NOE RD APPLETON, WI 54915</b>
42b. Telephone number of authorized person:	<b>(920) 217-5983</b>
42c. Fax number of authorized person:	<b>(920) 739-1522</b>
42d. E-mail of authorized person:	<b>cfisher@e-clipsenet.com</b>
42e. Name of authorized person's employer	<b>Germantown School District</b>

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FCC Form

Approval by OMB  
3060-0806

470

# Schools and Libraries Universal Service Description of Services Requested and Certification Form

Estimated Average Burden Hours Per Response: 4.0 hours

This form is designed to help you describe the eligible telecommunications-related services you seek so that this data can be posted on the Fund Administrator website and interested service providers can identify you as a potential customer and compete to serve you.

Please read instructions before beginning this application.

(To be completed by entity that will negotiate with providers.)

**Block 1: Applicant Address and Identifications**

Form 470 Application Number: 110840000517455

Applicant's Form Identifier: 470GermSDY8

Application Status: INCOMPLETE

Posting Date:

Allowable Contract Date:

Certification Received Date:

**1. Name of Applicant:**

GERMANTOWN SCHOOL DISTRICT

**2. Funding Year:**

07/01/2004 - 06/30/2005

**3. Your Entity Number**

132728

**4a. Applicant's Street Address, P.O.Box, or Route Number**

N104W13840 DONGES BAY RD

City

GERMANTOWN

State

WI

Zip Code

53022 - 4430

**b. Telephone number**

ext.

(414) 253- 3904

**c. Fax number**

(414) 251- 6999

**d. E-mail Address****5. Type Of Applicant**

- ☒ Individual School (individual public or non-public school)
- ☒ School District (LEA; public or non-public [e.g., diocesan] local district representing multiple schools)
- ☐ Library (including library system, library branch, or library consortium applying as a library)
- ☐ Consortium (intermediate service agencies, states, state networks, special consortia)

**6a. Contact Person's Name:** Craig Fisher

First, fill in every item of the Contact Person's information below that is different from Item 4, above.  
Then check the box next to the preferred mode of contact. (At least one box **MUST** be checked.)

**6b. Street Address, P.O.Box, or Route Number**

N9109 NOE RD

City

APPLETON

State

WI

Zip Code

54915

**6c. Telephone Number**

(920) 217- 5983

6d. Fax Number (920) 739-1522  
 6e. E-mail Address cfisher@e-clipsenet.com

### Block 2: Summary Description of Needs or Services Requested

#### 7 This Form 470 describes (check all that apply):

- a. ☐ Tariffed services - telecommunications services, purchased at regulated prices, for which the applicant has no signed, written contract. A new Form 470 must be filed for tariffed services for each funding year.
- b. ☐ Month-to-month services for which the applicant has no signed, written contract. A new Form 470 must be filed for these services for each funding year.
- c. ☐ Services for which a new written contract is sought for the funding year in Item 2.
- d. ☐ A multi-year contract signed on or before 7/10/97 but for which no Form 470 has been filed in a previous program year.

**NOTE:** Services that are covered by a signed, written contract executed pursuant to posting of a Form 470 in a previous program year OR a contract signed on/before 7/10/97 and reported on a Form 470 in a previous year as an existing contract do NOT require filing of a Form 470.

**What kinds of service are you seeking: Telecommunications Services, Internet Access, or Internal Connections? Refer to the Eligible Services List at [www.sl.universalservice.org](http://www.sl.universalservice.org) for examples. Check the relevant category or categories (8, 9, and/or 10 below), and answer the questions that apply.**

#### 8 ☐ Telecommunications Services

**Do you have a Request for Proposal (RFP) that specifies the services you are seeking?**

- a. ☐ YES, I have an RFP. It is available on the web at or via (check one):  
☐ the Contact Person in Item 6 or ☐ the contact listed in Item 11.

b. ☒ NO, I do not have an RFP for these services.

If you answered NO, you must list below the Telecommunications Services you seek. Specify each service or function (e.g., local voice service) and quantity and/or capacity (e.g., 20 existing lines plus 10 new ones). See the Eligible Services List at [www.sl.universalservice.org](http://www.sl.universalservice.org) for examples of eligible Telecommunications Services. Remember that only eligible telecommunications providers can provide these services under the universal service support mechanism. Add additional lines if needed.

Service or Function:	Quantity and/or Capacity:
Local / Basic Telephone Service	180 Existing Lines
Cellular Service	10 Existing Cell Phones
Long Distance Service	on All Existing Lines
WAN Service	8 Leased T1 Lines Connecting Buildings

#### 9 ☐ Internet Access

**Do you have a Request for Proposal (RFP) that specifies the services you are seeking?**

- a. ☐ YES, I have an RFP. It is available on the Web at or via (check one):  
☐ the Contact Person in Item 6 or ☐ the contact listed in Item 11.

b. ☒ NO, I do not have an RFP for these services.

If you answered NO, you must list below the Internet Access Services you seek. Specify each service or function (e.g., monthly Internet service) and quantity and/or capacity (e.g., for 500 users). See the Eligible Services List at [www.sl.universalservice.org](http://www.sl.universalservice.org) for examples of eligible Internet Access Services. Add additional lines if needed.

Service or Function:	Quantity and/or Capacity:
Unbundled Internet Access	for 3700 Students

**10 ☐ Internal Connections****Do you have a Request for Proposal (RFP) that specifies the services you are seeking?****a ☒ YES, I have an RFP. It is available on the Web at or via (check one):**☐ the Contact Person in Item 6 or ☐ the contact listed in Item 11.**b ☐ NO, I do not have an RFP for these services.****If you answered NO, you must list below the Internal Connections Services you seek. Specify each service or function (e.g., local area network) and quantity and/or capacity (e.g., connecting 10 rooms and 300 computers at 56kbps or better). See the Eligible Services List at [www.sl.universalservice.org](http://www.sl.universalservice.org) for examples of eligible Internal Connections services. Add additional lines if needed.****11 (Optional) Please name the person on your staff or project who can provide additional technical details or answer specific questions from service providers about the services you are seeking. This need not be the contact person listed in Item 6 nor the signer of this form.**

Name:

Title:

Telephone number

( ) -

Fax number

( ) -

E-mail Address

**12. ☐ Check here if there are any restrictions imposed by state or local laws or regulations on how or when providers may contact you or on other bidding procedures. Please describe below any such restrictions or procedures, and/or provide Web address where they are posted and a contact name and telephone number for service providers without Internet access.****13. If you intend to enter into a multi-year contract based on this posting or a contract featuring an option for voluntary extensions you may provide that information below. If you have plans to purchase additional services in future years, or expect to seek new contracts for existing services, summarize below (including the likely timeframes).****Block 3: Technology Assessment****14. ☐ Basic telephone service only: If your application is for basic local and long distance telephone service (wireline or wireless) only, check this box and skip to Item 16.****15. Although the following services and facilities are ineligible for support, they are usually necessary to make effective use of the eligible services requested in this application. Unless you indicated in Item 14 that your application is ONLY for basic telephone service, you must check at least one box in (a) through (e). You may provide details for purchases being sought.****a. Desktop communications software: Software required ☒ has been purchased; and/or ☐ is being sought.****b. Electrical systems: ☒ adequate electrical capacity is in place or has already been arranged; and/or ☐ upgrading for additional electrical capacity is being sought.****c. Computers: a sufficient quantity of computers ☒ has been purchased; and/or ☐ is being sought.****d. Computer hardware maintenance: adequate arrangements ☒ have been made; and/or ☐ are being sought.****e. Staff development: ☒ all staff have had an appropriate level of training /additional training has already been scheduled; and/or ☐ training is being sought.****f. Additional details: Use this space to provide additional details to help providers to identify the services you desire.**

### Block 4: Recipients of Service

**16. Eligible Entities That Will Receive Services:**

Check the ONE choice (a,b or c) that best describes this application and the eligible entities that will receive the services described in this application. You will then list in Item 17 the entity/entities that will pay the bills for these services.

a. ☐ Individual school or single-site library.

b. ☐ Statewide application for (enter 2-letter state code) representing (check all that apply):

- ☐ All public schools/districts in the state:  
☐ All non-public schools in the state:  
☐ All libraries in the state:

If your statewide application includes INELIGIBLE entities, check here. ☐ If checked, complete Item 18.

c. ☒ School district, library system, or consortium application to serve multiple eligible entities:

<b>Number of eligible entities</b>	6
<i>For these eligible sites, please provide the following</i>	
<b>Area Codes (list each unique area code)</b>	<b>Prefixes associated with each area code (first 3 digits of phone number) separate with commas, leave no spaces</b>
262	253
If your application includes INELIGIBLE entities, check here. <input type="checkbox"/> If checked, complete Item 18.	

**17. Billed Entities**

List the entity/entities that will be paying the bills directly to the provider for the services requested in this application. These are known as Billed Entities. At least one line of this item must be completed. Attach additional sheets if necessary.

Entity Number	Entity
132728	GERMANTOWN SCHOOL DISTRICT

**18. Ineligible Participating Entities**

Does your application also seek bids on services to entities that are not eligible for the Universal Service Program? If so, list those entities here (attach pages if needed):

Ineligible Participating Entity	Area Code	Prefix

### Block 5: Certification

<b>19. The applicant includes: (Check one or both)</b>	
<input type="checkbox"/> a. schools under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20 U.S.C. Secs. 7801(18) and (38), that do not operate as for-profit businesses, and do not have endowments exceeding \$50 million; and/or	<input type="checkbox"/> b. libraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any school (including, but not limited to elementary and secondary schools, colleges and universities).
<b>20. All of the individual schools, libraries, and library consortia receiving services under this application are covered by:</b>	
<input type="checkbox"/> a. individual technology plans for using the services requested in the application, and/or	
<input type="checkbox"/> b. higher-level technology plans for using the services requested in the application, or	
<input type="checkbox"/> c. no technology plan needed; application requests basic local and/or long distance telephone service only.	
<b>21. Status of technology plans (if representing multiple entities with mixed technology plan status, check both a and b):</b>	
<input type="checkbox"/> a. technology plan(s) has/have been approved by a state or other authorized body.	<input type="checkbox"/> b. technology plan(s) will be approved by a state or other authorized body.
<input type="checkbox"/> c. no technology plan needed; application requests basic local and long distance telephone service only.	
<b>22. F</b> I certify that the services the applicant purchases at discounts provided by 47 U.S.C. Sec. 254 will be used solely for educational purposes and will not be sold, resold, or transferred in consideration for money or any other thing of value.	
<b>23. F</b> I recognize that support under this support mechanism is conditional upon the school(s) or library(ies) I represent securing access to all of the resources, including computers, training, software, maintenance, and electrical connections necessary to use the services purchased effectively.	
<b>24. F</b> I certify that I am authorized to submit this request on behalf of the above-named entities, that I have examined this request, and to the best of my knowledge, information, and belief, all statements of fact contained herein are true.	
<b>25. Signature of authorized person:</b> <input type="checkbox"/>	
<b>26. Date (mm/dd/yyyy):</b>	
<b>27. Printed name of authorized person:</b> Craig Fisher	
<b>28. Title or position of authorized person:</b> Erate Technology Consultant	
<b>29a. Address of authorized person:</b> N9109 NOE RD	
<b>City:</b> APPLETON <b>State:</b> WI <b>Zip:</b> 54915	
<b>29b. Telephone number of authorized person:</b> (920) 217 - 5983	
<b>29c. Fax number of authorized person:</b> (920) 7391522	
<b>29d. E-mail address number of authorized person:</b> cfisher@e-clipsenet.com	



**Persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.**

History Code, 18 U.S.C. Sec. 1001.

**Service provider involvement with preparation or certification of a Form 470 can taint the competitive bidding process and result in the denial of funding requests. For more information, refer to the "Service Provider Role in Assisting Customers" at [www.sl.universalservice.org/vendor/manual/chapter5.doc](http://www.sl.universalservice.org/vendor/manual/chapter5.doc) or call the Client Service Bureau at 1-888-203-8100.**

**NOTICE:** Section 54.504 of the Federal Communications Commission's rules requires all schools and libraries ordering services that are eligible for and seeking universal service discounts to file this Description of Services Requested and Certification Form (FCC Form 470) with the Universal Service Administrator, 47 C.F.R. § 54.504. The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended, 47 U.S.C. § 254. The data in the report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47 C.F.R. § 54.504. All schools and libraries planning to order services eligible for universal service discounts must file this form themselves or as part of a consortium.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or a potential violation of a FCC statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding. In addition, information provided in or submitted with this form or in response to subsequent inquiries may also be subject to disclosure consistent with the Communications Act of 1934, FCC regulations, the Freedom of Information Act, 5 U.S.C. § 552, or other applicable law.

If you owe a past due debt to the federal government, the information you provide may also be disclosed to the Department of the Treasury Financial Management Service, other Federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide the information to these agencies through the matching of computer records when authorized.

If you do not provide the information we request on the form, the FCC may delay processing of your application or may return your application without action.

The foregoing Notice is required by the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501, et seq.

Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, DC 20554.

Please submit this form to:

**SLD-Form 470  
P.O. Box 7026  
Lawrence, Kansas 66044-7026  
1-888-203-8100**

For express delivery services or U.S. Postal Service, Return Receipt Requested, mail this form to:

**SLD-Form 470  
c/o Ms. Smith  
3833 Greenway Drive  
Lawrence, Kansas 66046  
1-888-203-8100**

FCC Form 470  
May 2003

**Close Print Preview**